Iliofemoral Acute DVT: A pathway to treatment

Stephen Black and Gerard O’Sullivan
Historical Problem

- Medical Management only
- Wells score and duplex
- Patients managed as outpatients
- Pathway does not always involve clinicians
- Primary objective VTE recurrence
- DOAC’s have made OP pathway easier
Feedback Loop
Treating venous thromboembolism

1. Treating VTE

2. Information for patients

3. Pharmacological interventions

4. Thrombolytic therapy

5. Mechanical interventions

6. Investigations and tests for patients diagnosed with VTE
   - Investigations for cancer
   - Thrombophilia testing
Pathway Iliofemoral DVT

- Identify patients
- Imaging: CT/MR/Duplex
- Treatment strategy: Lysis/MDT
- Post lysis treatment: Stent
Which Treatment

• Catheter Directed Lysis (CDT)
• Assisted CDT
• Mechanical Lysis
• Mechanical alone

Influenced by local factors and experience
Team
Conclusion

- A new era of increased treatment options mean pathways need to change
- Need to improve the evidence base
- Clarify the role of MTD
- Understand where stents are needed
- Demonstrate benefit to patients over short and long term
- Team is vital
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